



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

J. Brian Murphy, Treasurer  
Democratic State Committee Delaware  
P.O. Box 2065  
Wilmington, DE 19899

APR 18 2001

Identification Number: C00211763

Reference: 30 Day Post-General Report (10/19/00-11/27/00)

Dear Mr. Murphy:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule A of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(f) and 11 CFR §110.1(d) preclude a committee and its affiliates from receiving contributions from another political committee or person in excess of \$5,000 per calendar year.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with the clarifying information. If the contribution(s) you received exceeded the limits, you must seek reattribution of the contribution pursuant to 11 CFR §110.1(k), transfer-out the amount in excess of \$5,000 to an account not used to influence federal elections or refund the excessive amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all reattributions, transfers-out, and refunds should be made within sixty days of the treasurer's receipt of the contribution(s). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of granting written authorization for a reattribution or transfer-out to another account or receiving a refund.

DEMOCRATIC STATE COMMITTEE DELAWARE  
PAGE 2

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. In addition, any reattributions should be reported as memo entries on Schedule A of the report covering the period during which the authorization for the reattribution is received. Any transfers-out or refunds should be disclosed on Schedule B supporting Line 22 or 28 of the report during which the transaction was made.

Although the Commission may take further legal action regarding the acceptance of an excessive contribution(s), prompt action by your committee to seek reattribution, transfer-out or refund the excessive amount will be taken into consideration.

-Schedule B supporting Line 22 (pertinent portion(s) attached) discloses \$105,065.19 in disbursements to Democratic State Committee Non-Federal Account for "Refund". You are advised that 11 CFR §102.5 prohibits a non-federal account from financing activity in connection with federal elections. Please provide clarifying information regarding these transactions including the date(s) when the original activity was conducted by the non-federal account. In addition, if any of the disbursements disclosed on Schedule B supporting Line 22 were made to influence the election or defeat of specific federal candidates, the disbursements should be allocated accordingly and disclosed as either in-kind contributions on Schedule B supporting Line 23, or as coordinated expenditures on Schedule F supporting Line 25. 11 CFR §§104.3(b)(3) and 106.1

Although the Commission may initiate legal action regarding the activities conducted by your non-federal account, any clarifying information that you can provide will be taken into consideration.

-Schedule B supporting Line 22 discloses a refund made to your non-federal account; however, it appears that the receipt of this contribution has not been reported by your committee. Please provide the original date of receipt of the contribution. In addition, you must amend the report covering the period during which the contribution was received to disclose the receipt on Schedule A supporting the appropriate line of the Detailed Summary Page. 11 CFR §103.3(b)(1)

-Schedule H4 discloses a disbursement(s) which is categorized as a

fundraising expense(s); however, a Schedule H2 has not been filed to disclose the allocation ratio. All committees are required to allocate the direct costs of each fundraising event in which the committee collects both federal and non-federal funds. The costs are allocated according to the funds received ratio and reported on Schedule H2. 11 CFR §§106.5(f) and 106.6(d). Please file a Schedule H2 to disclose the ratio for the fundraising event(s).

-Schedule H4 discloses a disbursement(s) which is categorized as an exempt expense(s); however, a Schedule H2 has not been filed to disclose the allocation ratio. All committees are required to allocate the direct costs of each exempt activity in which the committee disburses funds for both federal and non-federal purposes. The costs are allocated according to the time and space method and reported on Schedule H2. 11 CFR §106.5(e). Please file a Schedule H2 to disclose the ratio for the exempt activity.

-Itemized disbursements must include a brief statement or description of why the disbursements were made. Please amend Schedule(s) H4 of your report to clarify the following description(s): "Consultant", "Consultants", "GOTV", and "Contractor". For further guidance regarding acceptable purposes of disbursements, please refer to 11 CFR §104.3(b)(3).

-Please clarify all expenditures for "voter registration" and "get-out-the-vote". In addition, if any of the voter registration or get-out-the-vote activities referenced House or Senate candidates, they should be allocated accordingly, unless merely incidental to the overall activity. If a portion or all of these expenditures were made on behalf of federal candidates, they should be reported on Schedules B, E or F for Lines 23, 24 or 25 of the Detailed Summary Page, as appropriate.

-You have made disbursements for "Advertising" which you have characterized as exempt activities. In order for an activity to be classified as exempt, it must meet the following conditions: (1) For slate cards and sample ballots: it names at least three candidates running for election to any public office, it is not distributed through public political advertising (including broadcast media, newspapers, magazines, and billboards), the content is limited to the identification of each candidate, the office or position currently held, the office sought and party affiliation, and the costs allocable to federal candidates are paid with permissible funds; (2) For

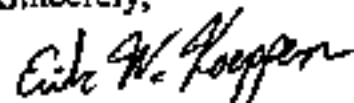
campaign materials: the activity is conducted on behalf of the party's nominees in the general election, the materials are distributed by volunteers-not through public political advertising, the party committee does not use materials purchased by the national party committee or money transferred from the national committee to purchase materials, the party committee does not use funds designated for a particular federal candidate, a payment from a non-federal campaign to help pay for the materials does not exceed its allocated share of the expenses, and the costs allocable to federal candidates are paid with permissible funds; (3) For voter drives: the activity is on behalf of the party's Presidential and Vice Presidential nominees, the activity does not involve the use of public political advertising such as television, radio, newspapers, magazines, billboards or direct mail, phone banks are operated by volunteers (although paid professionals may design the system, develop calling instructions and train supervisors), the party committee does not use funds transferred by the national party committee for voter drive activities, the party committee does not use funds designated for a particular federal candidate, and the cost allocable to federal candidates are paid with permissible funds.

If the activity disclosed on your report does not meet the definition of "exempt" activity as described above, and if any portion of the expenditures were made on behalf of specifically identified candidates, this amount must be disclosed on Schedule B or F supporting Line 23 or 25 of the Detailed Summary Page as appropriate. Please provide the Commission with a more detailed explanation of these activities.

-Please clarify all expenditures made for "Advertising" on Schedule(s) H4. If a portion or all of these expenditures were made on behalf of specifically identified federal candidates, this amount should be disclosed on Schedules B, E, or F supporting Lines 23, 24 or 25 and include the amount, name, address and office sought by each candidate. 11 CFR §§104.3(b) and 106.1

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,



Erik W. Koeppen  
Reports Analyst  
Reports Analysis Division

**SCHEDULE A****ITEMIZED RECEIPTS**Use Separate schedule(s)  
for each category of the  
Detailed Summary Page

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OF

FOR LINE NUMBER

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**Contributions from PACS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (in Full)** Democratic State Committee (Delaware)

|   |   |  |   |
|---|---|--|---|
| <b>A. Full name, Mailing Address and ZIP code</b><br>Sheet Metal Workers Local 19<br>1301 S Columbus Blvd<br>Philadelphia, PA 19147<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br><br><b>Aggregate Year-to-Date</b> | <b>Date (month, day, year)</b><br>10/31/2000<br><br>10/31/2000<br><br>\$5,000.00 | <b>Amount of Each Receipt This Period</b><br><br><br>\$5,000.00 |
| <b>B. Full name, Mailing Address and ZIP code</b><br>IBEW COPE<br>1126 15th St. NW<br>Washington, DC 20005<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                    | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br><br><b>Aggregate Year-to-Date</b> | <b>Date (month, day, year)</b><br>10/31/2000<br><br>10/31/2000<br><br>\$5,000.00 | <b>Amount of Each Receipt This Period</b><br><br><br>\$5,000.00 |
| <b>C. Full name, Mailing Address and ZIP code</b><br>Comm on Letter Carriers Pol. Educ.<br>100 Indiana Ave NW<br>Washington, DC 20036<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br><br><b>Aggregate Year-to-Date</b> | <b>Date (month, day, year)</b><br>10/26/2000<br><br>10/26/2000<br><br>\$5,000.00 | <b>Amount of Each Receipt This Period</b><br><br><br>\$5,000.00 |
| <b>D. Full name, Mailing Address and ZIP code</b><br>UAW VCAP<br>8000 E. Jefferson Dr<br>Detroit, MI 48214<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                    | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br><br><b>Aggregate Year-to-Date</b> | <b>Date (month, day, year)</b><br>11/06/2000<br><br>11/06/2000<br><br>\$5,000.00 | <b>Amount of Each Receipt This Period</b><br><br><br>\$5,000.00 |
| <b>E. Full name, Mailing Address and ZIP code</b><br>Mason Tenders District Council of Greater<br>32 W. 18th St, 7th Fl<br>New York, NY 10011<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br><br><b>Aggregate Year-to-Date</b> | <b>Date (month, day, year)</b><br>11/03/2000<br><br>11/03/2000<br><br>\$5,000.00 | <b>Amount of Each Receipt This Period</b><br><br><br>\$5,000.00 |
| <b>F. Full name, Mailing Address and ZIP code</b><br>New Jersey State Laborer's PAC<br>104 Interchange Pl, Ste 301<br>Cranbury, NJ 08512<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)      | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br><br><b>Aggregate Year-to-Date</b> | <b>Date (month, day, year)</b><br>11/03/2000<br><br>11/03/2000<br><br>\$5,000.00 | <b>Amount of Each Receipt This Period</b><br><br><br>\$5,000.00 |
| <b>G. Full name, Mailing Address and ZIP code</b><br>UFCW Intl Union<br>1775 K St NW<br>Washington, DC 20006<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                  | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><br><br><b>Aggregate Year-to-Date</b> | <b>Date (month, day, year)</b><br>10/31/2000<br><br>10/31/2000<br><br>\$5,000.00 | <b>Amount of Each Receipt This Period</b><br><br><br>\$5,000.00 |

**SUBTOTAL** of Receipts This page (Optional)

\$35,000.00

**TOTAL** This Period (last page this line number only)

**SCHEDULE A****ITEMIZED RECEIPTS**Use Separate schedule(s)  
for each category of the  
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FOR LINE NUMBER

11c

**Contributions from PACS**

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**NAME OF COMMITTEE (in Full)** Democratic State Committee (Delaware)

|  |  |  |   |
|--|--|--|---|
| <b>A. Full name, Mailing Address and ZIP code</b><br>Daimler Chrysler Political Support Committe<br>PO Box 6040<br>Newark, DE 19714          | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b><br>05/23/2000 | <b>Amount of Each Receipt This Period</b><br>\$1,500.00 |
| <b>Receipt for:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Aggregate Year-to-Date</b> \$1,500.00         |  |   |
| <b>B. Full name, Mailing Address and ZIP code</b><br>Advanta Corporation Employees PAC<br>PO Box 15170<br>Wilmington, DE 19850               | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b><br>05/23/2000 | <b>Amount of Each Receipt This Period</b><br>\$1,500.00 |
| <b>Receipt for:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Aggregate Year-to-Date</b> \$1,500.00         |  |   |
| <b>C. Full name, Mailing Address and ZIP code</b><br>The NEA Fund For Children & Public Educ<br>1201 16th Street<br>Washington, DC 20036     | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b><br>05/15/2000 | <b>Amount of Each Receipt This Period</b><br>\$5,000.00 |
| <b>Receipt for:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Aggregate Year-to-Date</b> \$5,000.00         |  |   |
| <b>D. Full name, Mailing Address and ZIP code</b><br>I.B.E.W. -C.O.P.E.<br>1125 15th Street, NW<br>Washington, DC 20005                      | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b><br>04/06/2000 | <b>Amount of Each Receipt This Period</b><br>\$5,000.00 |
| <b>Receipt for:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Aggregate Year-to-Date</b> \$5,000.00         |  |   |
| <b>E. Full name, Mailing Address and ZIP code</b>  | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b>               | <b>Amount of Each Receipt This Period</b>               |
| <b>Receipt for:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Aggregate Year-to-Date</b>                    |  |   |
| <b>F. Full name, Mailing Address and ZIP code</b>  | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b>               | <b>Amount of Each Receipt This Period</b>               |
| <b>Receipt for:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Aggregate Year-to-Date</b>                    |  |   |
| <b>G. Full name, Mailing Address and ZIP code</b>  | <b>Name of Employer</b><br><br><b>Occupation</b> | <b>Date (month, day, year)</b>               | <b>Amount of Each Receipt This Period</b>               |
| <b>Receipt for:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Aggregate Year-to-Date</b>                    |  |   |

**SUBTOTAL** of Receipts This page (Optional)

\$13,000.00

**TOTAL** This Period (last page this line number only)

**SCHEDULE A****ITEMIZED RECEIPTS**Use Separate schedule(s)  
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**Contributions from Individuals/Corporations**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (in Full)** Democratic State Committee (Delaware)

|   |  |                                |   |
|---|--|--------------------------------|---|
| <b>A. Full name, Mailing Address and ZIP code</b><br>Bayard, Richard H.<br>9 Red Oak Rd<br>Wilmington, DE 19806<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                         | <b>Name of Employer</b><br>Bayard Firm             | <b>Date (month, day, year)</b> | <b>Amount of Each Receipt This Period</b><br><br>\$250.00   |
|   | <b>Occupation</b><br>Attorney                      | 10/19/2000                     |   |
|   | <b>Aggregate Year-to-Date</b><br>\$350.00          |                                |   |
| <b>B. Full name, Mailing Address and ZIP code</b><br>Malone, Paula<br>3 Red Oak Rd<br>Wilmington, DE 19806<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                              | <b>Name of Employer</b><br>Wings Foundation        | <b>Date (month, day, year)</b> | <b>Amount of Each Receipt This Period</b><br><br>\$250.00   |
|   | <b>Occupation</b><br>Doctor                        | 11/14/2000                     |   |
|   | <b>Aggregate Year-to-Date</b><br>\$250.00          |                                |   |
| <b>C. Full name, Mailing Address and ZIP code</b><br>Caspersen, Finn M.W.<br>PO Box 617<br>Gladstone, NJ 07934<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                          | <b>Name of Employer</b><br>Knickerbocker Financial | <b>Date (month, day, year)</b> | <b>Amount of Each Receipt This Period</b><br><br>\$1,000.00 |
|   | <b>Occupation</b><br>Executive                     | 10/25/2000                     |   |
|   | <b>Aggregate Year-to-Date</b><br>\$1,000.00        |                                |   |
| <b>D. Full name, Mailing Address and ZIP code</b><br>Brandt, Jr., William A.<br>2000 S. Bayside Dr, Villa 39<br>Coconut Grove, FL 33133<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Name of Employer</b><br>Self                    | <b>Date (month, day, year)</b> | <b>Amount of Each Receipt This Period</b><br><br>\$3,000.00 |
|   | <b>Occupation</b><br>Investor                      | 10/24/2000                     |   |
|   | <b>Aggregate Year-to-Date</b><br>\$3,000.00        |                                |   |
| <b>E. Full name, Mailing Address and ZIP code</b><br>Pennington, Kevin<br>3944 Ambert<br>Dallas, TX 75225<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                               | <b>Name of Employer</b><br>Excel Communications    | <b>Date (month, day, year)</b> | <b>Amount of Each Receipt This Period</b><br><br>\$1,000.00 |
|   | <b>Occupation</b><br>Executive                     | 10/31/2000                     |   |
|   | <b>Aggregate Year-to-Date</b><br>\$1,000.00        |                                |   |
| <b>F. Full name, Mailing Address and ZIP code</b><br>Kilroy, Kevin<br>37 Springbrook Ln<br>Newark, DE 19711<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                             | <b>Name of Employer</b><br>Bluestone Software      | <b>Date (month, day, year)</b> | <b>Amount of Each Receipt This Period</b><br><br>\$6,000.00 |
|   | <b>Occupation</b><br>CEO                           | 11/01/2000                     |   |
|   | <b>Aggregate Year-to-Date</b><br>\$6,000.00        |                                |   |
| <b>G. Full name, Mailing Address and ZIP code</b><br>Cooper, Lawrence E.<br>1250 Lake Hearn Dr, Ste 650<br>Atlanta, GA 30342<br><br>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Name of Employer</b><br>Self                    | <b>Date (month, day, year)</b> | <b>Amount of Each Receipt This Period</b><br><br>\$2,500.00 |
|   | <b>Occupation</b><br>Doctor                        | 11/16/2000                     |   |
|   | <b>Aggregate Year-to-Date</b><br>\$2,500.00        |                                |   |
| <b>SUBTOTAL of Receipts This page (Optional)</b>  |  |                                | <b>\$14,000.00</b>  |
| <b>TOTAL This Period (last page this line number only)</b>  |  |                                |   |

**SCHEDULE B****ITEMIZED DISBURSEMENT**
 Use Separate schedule(s)  
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**Transfers to Affiliated/Other Party Committees (B - Line 22)**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)** Democratic State Committee (Delaware)

| A. Full name, Mailing Address and ZIP code   | Purpose of Disbursement<br>Refund  | Date (month,<br>day, year) | Amount of Each<br>Disbursement This Period |
|--|--|----------------------------|--|
| Democratic State Committee Non-Federal Ac<br>PO Box 2065<br>Wilmington, DE 19899   | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                      | 10/25/2000                 | \$46.20                                    |
| B. Full name, Mailing Address and ZIP code<br>Democratic State Committee Non-Federal Ac<br>PO Box 2065<br>Wilmington, DE 19899 | Purpose of Disbursement<br>refund<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 10/25/2000                 | \$2,662.00                                 |
| C. Full name, Mailing Address and ZIP code<br>Democratic State Committee Non-Federal Ac<br>PO Box 2065<br>Wilmington, DE 19899 | Purpose of Disbursement<br>Refund<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 10/25/2000                 | \$154.00                                   |
| D. Full name, Mailing Address and ZIP code<br>Democratic State Committee Non-Federal Ac<br>PO Box 2065<br>Wilmington, DE 19899 | Purpose of Disbursement<br>Refund<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 10/25/2000                 | \$740.99                                   |
| E. Full name, Mailing Address and ZIP code<br>Democratic State Committee Non-Federal Ac<br>PO Box 2065<br>Wilmington, DE 19899 | Purpose of Disbursement<br>Refund<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 11/01/2000                 | \$14,700.00                                |
| F. Full name, Mailing Address and ZIP code<br>Democratic State Committee Non-Federal Ac<br>PO Box 2065<br>Wilmington, DE 19899 | Purpose of Disbursement<br>Refund<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 11/01/2000                 | \$86,762.00                                |
| G. Full name, Mailing Address and ZIP code<br>DNC-Federal<br>430 S. Capital St SE<br>Washington, DC 20003                      | Purpose of Disbursement<br>Refund<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 11/22/2000                 | \$6,300.00                                 |
| H. Full name, Mailing Address and ZIP code   | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | Date (month,<br>day, year) | Amount of Each<br>Disbursement This Period |
| I. Full name, Mailing Address and ZIP code   | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | Date (month,<br>day, year) | Amount of Each<br>Disbursement This Period |
| <b>SUBTOTAL</b> of Disbursements This page (Optional)  |  |                            |  |
| <b>TOTAL</b> This Period (last page this line number only)   |  |                            | \$111,365.19                               |



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